

2004 ANNUAL REPORT



HEALTH CARE FOR HEROES

VA DESERT PACIFIC
HEALTHCARE NETWORK

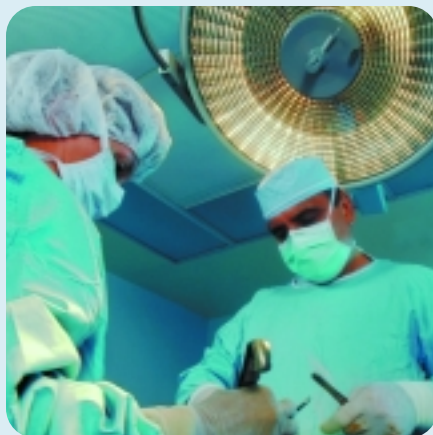


SERVING THOSE WHO



Prevention and Outpatient Care

We provide a full range of primary, specialty and subspecialty care to outpatients at our medical centers, ambulatory care centers and at community clinics throughout Southern California and Southern Nevada. Skilled primary care teams focus on preventing illness and managing the health of veterans through annual preventive screenings, immunizations and education. Specialized medical, surgical and mental health care is also provided to avoid hospitalization and keep veterans home with their families.



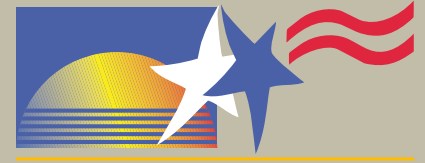
Acute Hospital Care

Hospital care and emergency services are available at medical centers in San Diego, Loma Linda, Long Beach and Los Angeles. In Las Vegas, acute hospitalization is currently provided through a Joint Venture with the Air Force at the Mike O'Callaghan Federal Hospital. Specialty services such as open-heart surgery, neurosurgery and radiation therapy are provided at central sites within the Network. Specialized programs also provide care to veterans with HIV/AIDS, Parkinson's disease and other conditions.



Mental Health Care

A wide variety of mental health services are provided to veterans suffering from emotional stress and readjustment issues, substance abuse, homelessness, acute and chronic psychiatric illnesses and Post Traumatic Stress Disorder (PTSD). Our behavioral health care teams ensure that those in need receive the best treatment in the most appropriate setting. Patients move through different levels of care according to their changing needs. Partnerships have been established with community agencies to provide homeless services, transitional housing and job assistance. Mental Illness Research, Education and Clinical Care Programs also enhance care.



SERVED



Long Term Care

The primary goal of our long term care program is to keep veterans in their homes or with their families as long as possible by providing a variety of home-based care and rehabilitative services. Home care options include Home Based Primary Care, Tele-home Care, Homemaker Services, Adult Day Care and Respite Care. For veterans needing more services, nursing home care is provide at VA centers in Loma Linda, Long Beach, San Diego, Los Angeles, Sepulveda and at contract sites in the community. Geriatric Research and Education Programs also enhance the care provided to the aging veteran.



Specialty Care

We specialize in providing care to veterans experiencing problems related to their military service both as recently returned combat veterans or from conflicts in the past. We offer acute and ongoing rehabilitative services at all sites as well as extensive care for veterans with spinal cord injuries at Long Beach and San Diego. We custom fabricate and fit prosthetic limbs and other medical and adaptive devices. Care to former POWs and those exposed to hazards associated with military service are also a high priority.

**Our Mission
is to serve the
health care
needs of
America's
veterans with
dignity and
compassion**

MESSAGE FROM OUR NETWORK DIRECTOR



Message from our Network Director:

The VA Desert Pacific Healthcare Network has an outstanding reputation for providing quality health care to veterans throughout Southern California and Southern Nevada. For the second year in a row we are proud to announce that our efforts to improve the quality of our services to veterans, employees and the community were recognized by our being awarded the Kenneth W. Kizer Quality Recognition Grant Award. This award is the highest quality award offered by Veterans Health Administration (VHA) in recognition of organizations that embrace continuous improvement. Winning this award is a major accomplishment; however, it only represents our continued commitment to the pursuit of excellence.

In looking back, 2004 was marked by a number of significant accomplishments for the Network and VA as a whole. We successfully underwent accreditation surveys for all of our health care and research programs. We initiated telemedicine programs to provide ongoing monitoring of veterans' health status from their homes and to expand mental health services at our community clinics. Our clinical performance and patient satisfaction outcome scores improved significantly and improvements in organizational efficiency were also achieved in the areas of finance, workload management and access to care. Locally and nationally we invested in ways to improve our outreach and care to returning service members from Iraq and Afghanistan and to underserved veterans throughout our Network. The Secretary's decision on the VA National CARES or Capital Asset Realignment for Enhanced Services Plan will also improve veteran access to care through the construction of a new VA Medical Center in Las Vegas as well as a Blind Rehabilitation Center in Long Beach. Seismic corrections and other important capital projects were also part of the plan as was the development of a land use plan for the West Los Angeles Medical Center campus.

In our effort to improve, we welcome the input of our veterans, employees, volunteers, veterans' organizations, congressional representatives and community stakeholders. With your assistance and through the hard work of our dedicated employees, I believe we can meet and exceed our goals. Please don't hesitate to contact my office or your local health care facility leadership and give us your input and support.

Sincerely,

*Kenneth J. Clark
Network Director, VA Desert Pacific Healthcare Network*

**VA DESERT PACIFIC
HEALTHCARE NETWORK**



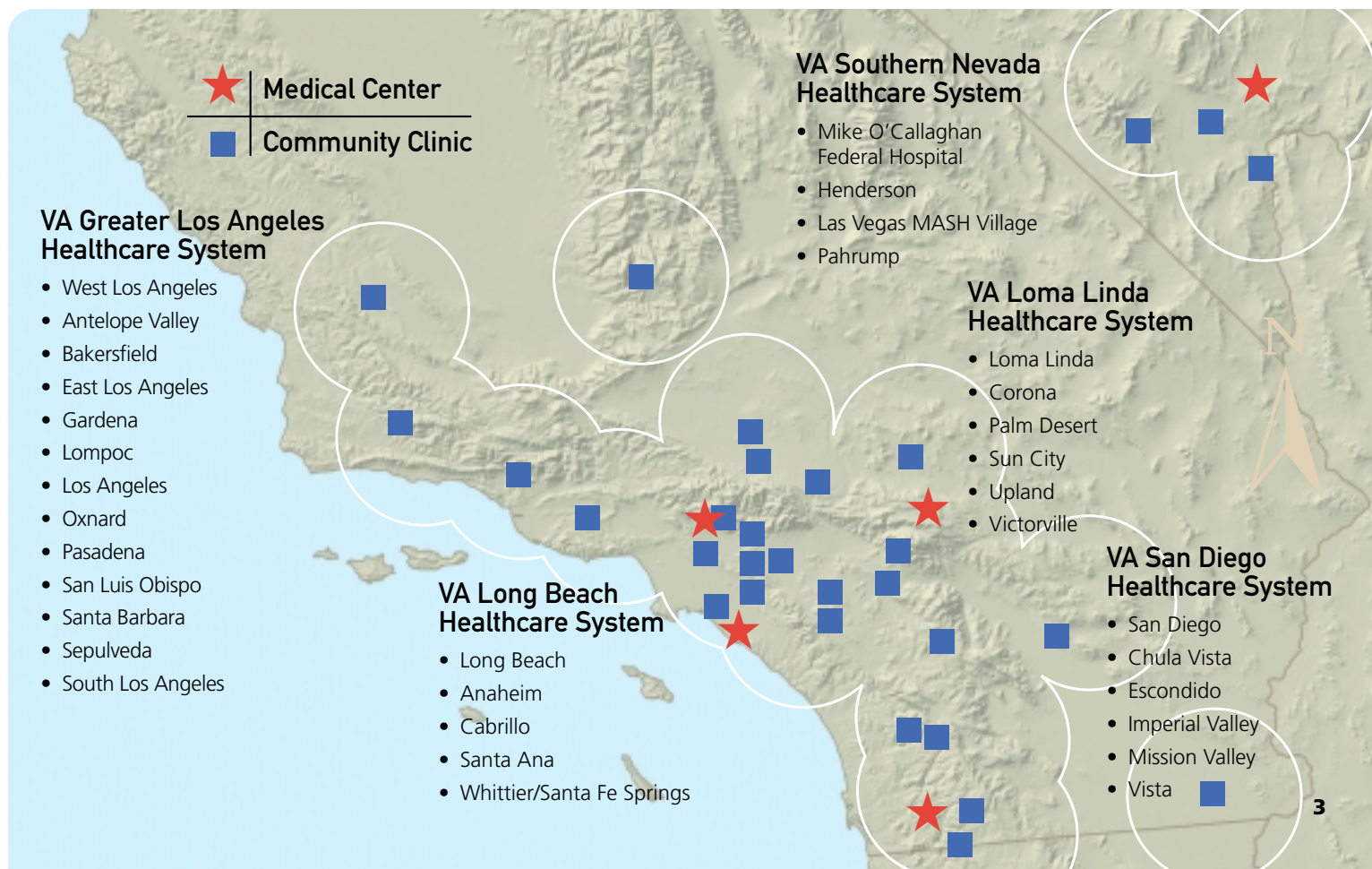
GOVERNANCE AND DECISION MAKING

We function under an organizational structure modeled after the world-renowned Malcolm Baldrige principles of performance excellence. This structure has assisted in making significant improvements in our performance and has brought us closer to achieving our goal of creating one seamless system of care for veterans in Southern California and Southern Nevada. Under this organization, senior-level leaders provide direct, on-site leadership at one of the Network's facilities while maintaining full responsibility for key Network program operations. Membership on Network councils and committees is both inter-facility and interdisciplinary to ensure broad representation.

We believe our organization brings improved access to high quality healthcare services to veterans while assuring our management systems keep pace with the ever-changing health care environment.

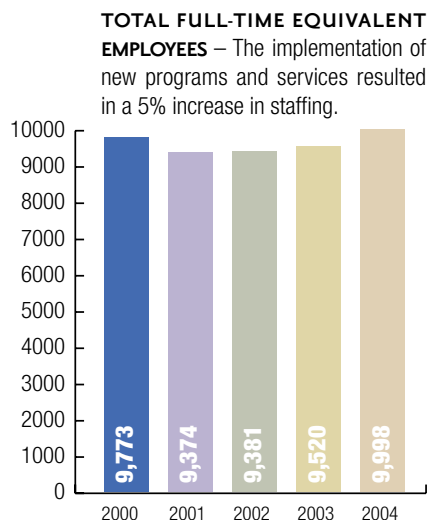
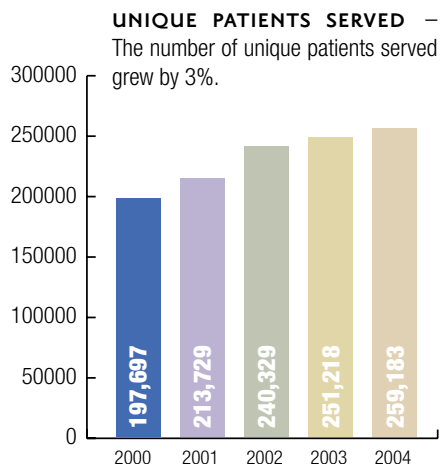
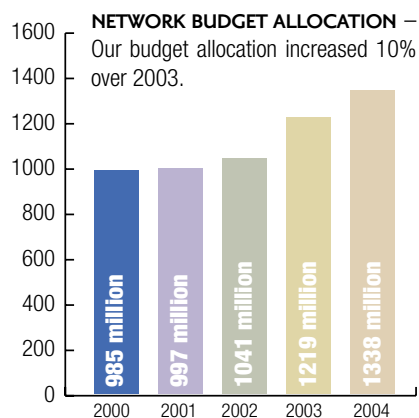
SERVING VETERANS THROUGHOUT SOUTHERN CALIFORNIA & SOUTHERN NEVADA

VA Desert Pacific Healthcare Network is one of 21 Healthcare Networks or Veterans Integrated Service Networks (VISNs) operated nationwide by the United States Department of Veterans Affairs (VA). We are comprised of five hospitals and 29 community-based clinics serving 1.2 million veterans residing in the 110,000 square miles that encompass Southern California and Southern Nevada.



2004

OUR YEAR IN REVIEW



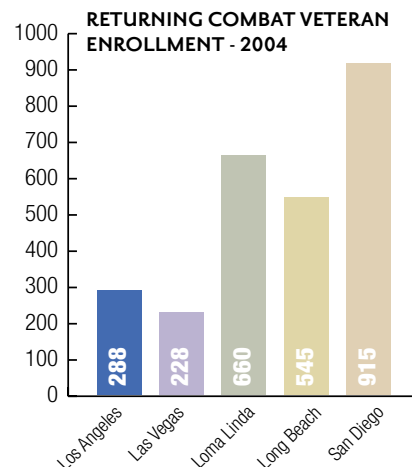
This year we were challenged by the desire to develop new programs with a limited budget and rising health care costs especially in the area of prescription drugs. Our full time equivalent employees rose slightly to 9,998 with 750 FTEE physicians and 1,978 professional nurses. We operated 1,905 beds including 917 acute, 639 nursing home, 321 domiciliary and 30 psychiatric residential beds. Our medical research and health professions education continued to be one of the largest in the VA system training 743 medical residents and thousands of nursing and allied health students. Over 615 researchers conducted in excess of 2,000 projects with more than \$100 million in total funding. We provided priority care to returning combat veterans from Iraq and Afghanistan enrolling 2,636 and providing acute hospitalization to 22. We stood ready to provide back-up clinical support to the Department of Defense and served as a national resource after hurricane Charlie and Francis devastated the Florida coast. Hundreds of employees volunteered to assist with disaster relief efforts with 15 deployed to provide much needed assistance.

We continued our strong affiliation with some of the finest Medical Schools in the United States including:

- University of California, Los Angeles (UCLA)
- University of Southern California (USC)
- University of California, San Diego (UCSD)
- University of California, Irvine (UCI)
- University of Nevada (UN)
- Loma Linda University (LLU)

We are home to a number of VA Centers of Excellence including Geriatric Research and Clinical Care, Patient Safety, Parkinson's Disease Research and Education Center, Homelessness, Mental Illness Research Education and Clinical Care, Spinal Cord Injury, Cardiac and Neurosurgery, Radiation Therapy, HIV/AIDS, Alzheimer's Care, Comprehensive Rehabilitation, Renal Dialysis and Epilepsy Care.

We provided priority care to returning combat veterans from Iraq and Afghanistan



CARES – Capital Asset Realignment for Enhanced Services

The results of the national VA CARES or Capital Asset Realignment for Enhanced Services planning initiative for our Network included the development of 10 Major Capital Projects totaling over \$900 million. The projects will address gaps in facilities and services identified throughout the Network. In addition, a national contractor will undertake a study of the land at the West Los Angeles VA Medical Center with stakeholder input gathered through a Federal Advisory Committee established for the site.

CARES Major Construction Projects:

- Las Vegas – New VA Medical Center and Nursing Home
- Long Beach – New Blind Rehabilitation Center and Seismic Corrections
- Greater Los Angeles – Seismic Corrections, Replacement Nursing Home and Research Building
- San Diego – Seismic Corrections, New Research Building
- Loma Linda – New Clinical and Research Additions

The projects will address gaps in facilities and services identified throughout the Network.



NATIONAL AWARDS AND RECOGNITIONS

Kenneth W. Kizer, Quality Recognition Grant Award – VA Desert Pacific Healthcare Network for the second year in a row. This award is the highest quality award offered by Veterans Health Administration (VHA).

Robert W. Carey Trophy Award – VA Loma Linda Healthcare System as VA's highest award for organizational excellence at the facility level.

Nevada Governor's Quality Awards for Performance Excellence (APEX) including The Nevada Award for Community Support and the Trailblazer Award for Performance Excellence – VA Southern Nevada Healthcare System

Primary Prevention Safety Award, co-sponsored by the National Alliance for the Primary Prevention of Sharps Injuries and *Infection Control Today* magazine – VA San Diego Healthcare System.

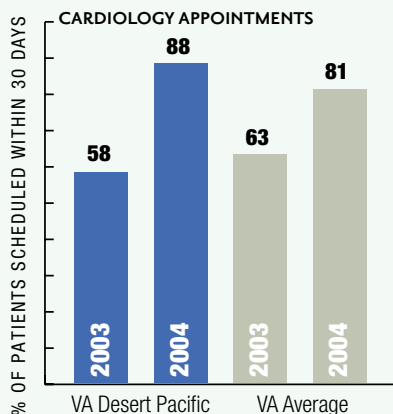
Deputy Secretary's Financial Efficiency Award – VA Long Beach and San Diego Healthcare Systems.

"The Heritage Award for 2003," from the Loma Linda Chamber of Commerce – VA Loma Linda Healthcare System.

We Have Improved Outcomes and Performance

- Received the Kenneth W. Kizer Quality Recognition Grant Award for the second year.
- Successfully completed unannounced Joint Commission on Accreditation of Healthcare Organizations (JCAHO) surveys of our medical centers.
- Achieved National Committee for Quality Assurance (NCQA) accreditation of all Network research programs.
- Implemented provider profiling at all sites to monitor individual practice patterns and quality.
- Standardized the quality of care across the Network through the consistent implementation of key clinical policies, protocols, practices, guidelines, and reminders.
- Reduced clinic wait times for the next available appointment.
- Computerized over 40 clinical reminders that prompt providers to take action on specific care needs such as flu shots, mammograms, tobacco and depression screening.
- Launched a Continuous Readiness Program and trained staff to conduct ongoing quality reviews.
- Sponsored facility and Network Performance Improvement Fairs to recognize teams for innovative quality improvement projects.
- Initiated the use of tracer methodology to "trace" and improve the care a patient experiences in the hospital or clinic.

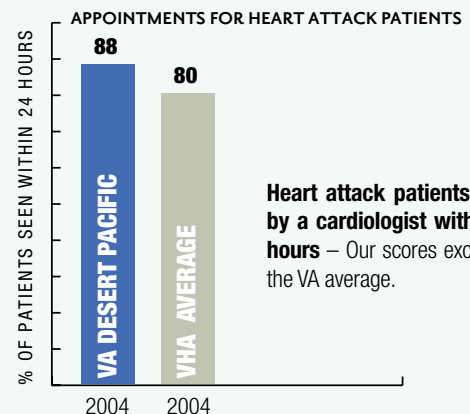
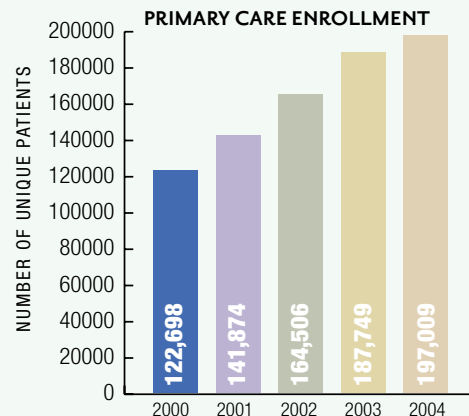
Access to cardiology appointments improve – 88% of patients requesting a Cardiology appointment were scheduled within 30 days. This represents a 34% improvement from 2003 and exceeds the VA national average.



Created a Culture of Patient Safety

- Implemented Healthcare Failure Mode and Effects Analysis.
- Developed a web-based Hazardous Alert and Recall system.
- Implemented Full Disclosure processes for notifying patients of adverse events.
- 90% of staff completed 20 hours of patient safety education.
- Implemented a process to elicit patient feedback on safety issues.
- Published a Quality and Safety Newsletter.
- Completed patient safety assessments at all facilities.

Patients with primary care providers increases – 90% of patients are assigned a primary care provider. The provision of primary care improves the overall coordination of care and patient and provider satisfaction.



Heart attack patients seen by a cardiologist within 24 hours – Our scores exceeded the VA average.

OUTCOMES, PATIENT SAFETY AND DISEASE PREVENTION

We Have Improved the Coordination and Integration of Care

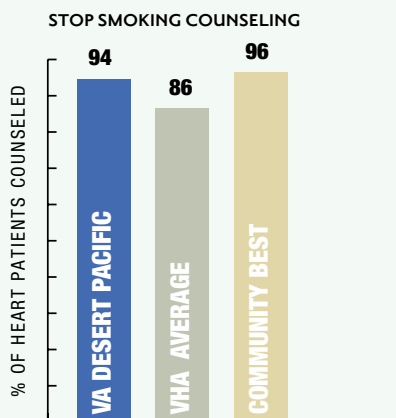
- Addressed the unique requirements of newly discharged combat veterans through the placement of coordinators at each site, plus training, outreach and care management.
- Implemented a Network Home Telehealth Care Program to manage chronic illness at home.
- 90% of all patients have an assigned primary care provider.
- Launched a Network Tele-Mental Health Program that will bring mental health services to community clinics.
- Expanded Advanced Clinic Access practices to improve clinical efficiency.
- Integrated key services Network-wide including: Imaging, Geriatrics, Laboratory and Pathology, Human Resources, Workers Compensation, and Medical Care Cost Recovery.
- Centralized the patient transfer process to ensure timely and coordinated transfers for specialized care.
- Established Mental Health Intensive Case Management teams at all qualified sites.
- Improved heart attack care with the purchase of new cardiac catheterization laboratories at three sites.



OUR GOALS FOR 2005

- Increase collaboration between VA and DoD during the military discharge process.
- Meet all clinical performance standards with limited variation between facilities.
- Use provider-specific profiles to institute standardized performance-based privileging.
- Increase the total number of goal sharing projects that focus on patient safety.
- Fully implement a Network Continuous Readiness program.
- Enhance mental health services at community clinics.
- Fully implement Advanced Clinic Access principles in all clinics.
- Complete a comprehensive assessment of key specialty services to determine appropriate capacity, sites of care, required resources and integration plan.
- Conduct an assessment of the Network Transfer Coordination Program
- Develop and implement a new safety curriculum with 95% of new employees receiving training.
- Enroll 750 patients in the new Home Telehealth Care Program.
- Ensure that research and education programs appropriately support the patient care mission.
- Monitor and improve medical staff supervision of trainees and its documentation.

Stop smoking counseling for hospitalized heart patients – 94% of heart patients receive stop smoking counseling while hospitalized. This exceeded VA and approaches best Community scores.



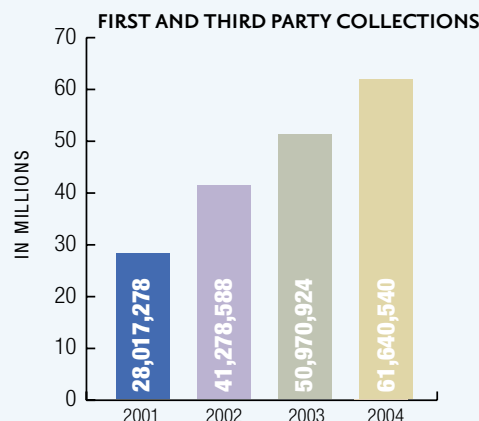
EFFICIENCY

USE RESOURCES

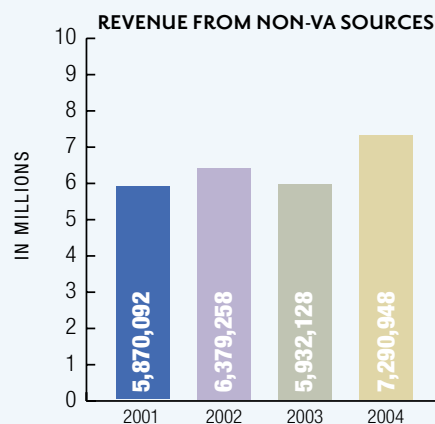
We developed sound financial strategies and achieved goals

- Exceeded our first and third party collection goal of \$59 million by over \$2.4 million.
- Implemented Workers' Compensation Cost Reduction Program.
- Maintained cost and quality measures within 5% of community benchmarks.
- Maintained 17 active VHA/DoD Sharing Agreements.
- Standardized supplies in collaboration with the Western States Network Consortium.
- Invested in information technology infrastructure equipment.
- Increased the number of unique veterans served by 3%.
- Developed and implemented a program to achieve and maintain full compliance in all business operations.
- Developed and implemented a set of productivity and cost-effectiveness standards for all Network facilities.

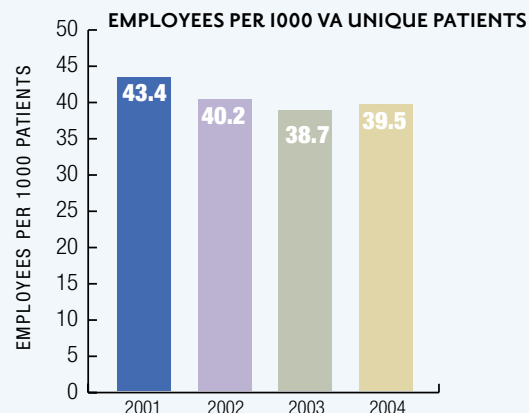
Collections Goal Exceeded – National goal of \$59 million was exceeded by \$2.4 million. Collections include payments from patients, insurance companies and other third-party payers. Money collected through this program directly supports our financial needs.



Non-VA Revenue Increased – Increased alternative revenue by 22%. This helped mitigate budget challenges.



Improved Efficiency – Efficient business practices have allowed us to provide care to more veterans without significant staffing increases. We remain consistent with national VA employment trends.

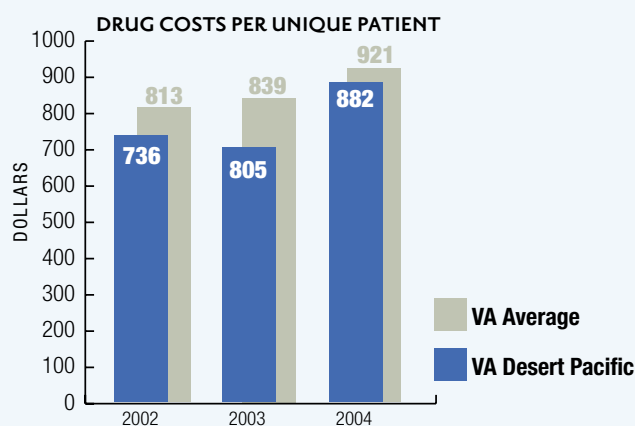


EFFICIENTLY TO MAXIMIZE BENEFITS TO VETERANS

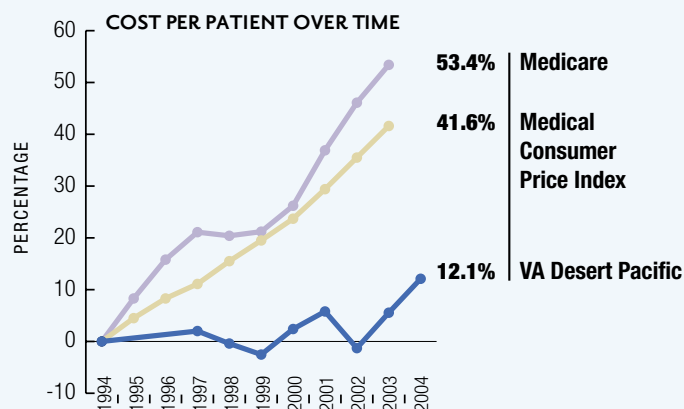
We aligned network financial structure and processes

- Converted financial systems to the new three appropriations structure.
- Supported facility restructuring for improved efficiency.
- Developed workload enhancement strategies.
- Consolidated Network Human Resources activities and hired a Network Manager.
- Completed an annual analysis of the 29 Network Community Clinics to evaluate quality, efficiency, access, and customer service.

Drug Costs Continue to Rise – Network drug costs rose 9% in 2004 yet still remained below the VA average. A team manages the Network drug formulary to control costs.



Cost Per Patient Remains Below Medicare – The percent change in our cost per patient remains well below that of Medicare and the Medical Consumer Price Index.



We improved utilization of clinical resources

- Reduced variation in use of pharmaceuticals.
- Reduced days of hospitalization.
- Assessed practice variations within the Network including mental health lengths-of-stay and pharmaceutical usage.
- Instituted Network Advisory Board in Radiology and Laboratory to ensure consistent quality and to standardize supplies and equipment.
- Increased numbers of patients discharged to independent living from homeless programs.
- Collaborated with the State of California to plan for the construction of a 400-bed Veterans Home on the grounds of West Los Angeles Campus.

OUR GOALS FOR 2005

- Increase VA/DoD sharing revenues by 5%.
- Meet or exceed first and third party collection goals.
- Expand VA sharing and collaboration with Indian Health Service, and state Veterans' organizations.
- Continue to look for opportunities for commodity standardization, and consolidated contract purchasing.
- Maintain and improve status on financial performance measures and metrics.
- Maintain a reasonable unit cost compared to other Networks and comparable medical center groups.
- Improve collection revenue cycle processes, procedures, and diagnostics.
- Ensure complete, accurate, and timely patient workload capture, coding, and classification.
- Evaluate and standardize the purchase of implantable devices.
- Expand tele-health, initiatives in radiology, pathology, home care and mental health.

ACCESS

ACHIEVE EQUITY OF ACCESS FOR ALL VETERANS

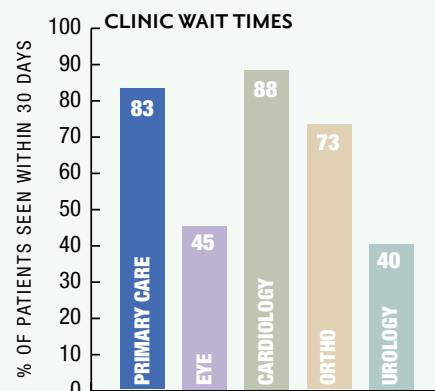
- Provided 98% of veterans with access to high quality VA primary care within 30 miles of their homes.
- Increased the provision of mental health services within community clinics.
- Received approval to build a new VA Medical Center and Nursing Home in Southern Nevada and a new clinic in Santa Maria, California.
- Submitted a proposal to establish a new community clinic in South Orange County, California.
- Sent 10,000 letters to recently discharged veterans from Iraq and Afghanistan informing them of their VA health care benefits.
- Enrolled 2,636 recently discharged combat veterans.
- Reestablished our Network Outreach Program.
- Implemented Institute for Healthcare Improvement (IHI) Initiatives such as group appointments to reduce wait times.
- Implemented a Gamblers Addiction Therapy Program in Las Vegas.
- Fully implemented a system of priority access for service connected and combat veterans.
- 83% of patients received primary care appointments within 30 days.
- Implemented tele-mental health and home telehealth care at all facilities.
- Maintained full compliance to patient and computer security requirements.
- Expanded the use of the Computerized Patient Record System (CPRS) with 92% of inpatient drug orders completed through Physician Order Entry and 99% of all progress notes, informed consents and advanced directives completed electronically.

OUR GOALS FOR 2005

- Conduct an assessment of Network and Facility capacity to meet growing need for specialized treatment of new veterans with amputations, post traumatic stress, blindness, spinal cord injuries and multiple traumatic injuries.
- Determine the appropriate balance of acute and long term Spinal Cord Injury care.
- Identify successful outreach initiatives to reach underserved veterans.
- Implement CARES plans to include a land use plan for West LA, a blind rehabilitation unit for Long Beach and a new medical center for Las Vegas.
- Implement expanded on-line patient services and MyHealtheVet.
- Expand sharing and collaboration with Indian Health Service and Department of Defense.
- Increase the number of patients provided home telehealth care services to 750.
- Implement a plan to provide mental health services in all community clinics.
- Annually review community clinics to determine the quality of care, productivity, customer service and need for expansion or modification.

- Established Network-wide Information Security Officer who provides audits and consultations.
- Led the nation in providing computer support to Vet Centers.
- Implemented on-line MyHealtheVet patient services including provisions for on-line appointment lookup, account balance, and prescription refills at all sites.

Veterans seen within 30 days increases – Implementation of open access and other improvements increased the number of patients receiving a primary care or specialty care appointment within 30 days. Challenges in Eye and Urology reflect the volume of services required by the aging veteran.



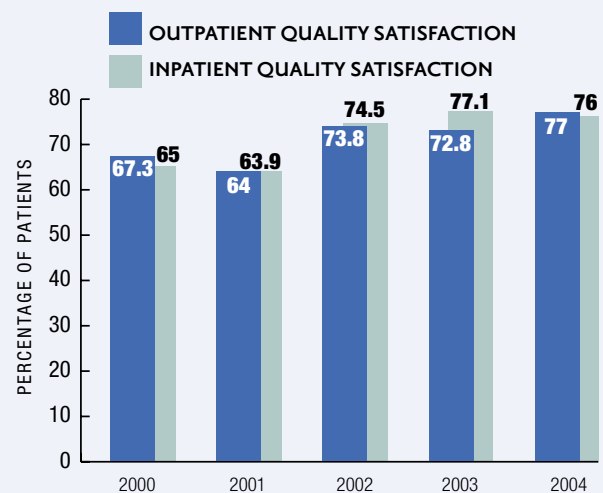
SATISFACTION

PROVIDE SERVICES THAT ARE REGARDED AS SUPERIOR

- Established Service Recovery Plans to enrich customer satisfaction.
- Provided 90% of targeted facility staff with Customer Service Training.
- Standardized New Employee Orientation to include customer service.
- Implemented employee scripting for key services.
- Piloted a plan for Patient Ambassadors.
- Developed a standardized Network-wide Patient Advocate data-reporting format.
- Utilized mini-surveys in targeted areas and other data to obtain customer feedback.
- Trained staff at all sites to conduct focus groups.
- Improved Veteran Inpatient and Outpatient Satisfaction Scores.
- Gave all primary care patients a copy of Healthwise for Life medical information handbook.
- Developed a policy on handling complaints referred from the VA Internet homepage.

- Created an inventory of Network best practices for sharing.
- Conducted focus groups to evaluate telephone service.
- Funded Customer Service Expositions at all Network facilities.

Patients satisfied with care – 77% of patients are satisfied with the quality of outpatient care. This is up from 73% in 2002 and exceeds the VA average of 63%. 76% of patients are satisfied with the quality of inpatient care. This is up from 74% in 2002 and exceeds the VA average of 73%.



OUR GOALS FOR 2005

- Fully implement Service Excellence Programs at all Network facilities.
- Implement Patient Ambassador Program.
- Develop customer service-related recognition program.
- Track, trend, analyze, and identify opportunities for improvement.
- Develop a customer service specific provider-profiling system.
- Identify new tools and approaches for measuring service excellence.
- Fully implement Service Improvement Programs at all Network facilities.
- Conduct focus groups to determine specific customer service problems.
- Revise the Network Internet site to better meet customer needs and VA guidelines.

WORK FORCE DEVELOPMENT

ENHANCE A WORKER-FRIENDLY ENVIRONMENT

- Implemented the Nurse Manager Academy.
- Increased goal sharing program participation to 30% Network-wide.
- Completed an All Employee Survey.
- Established a diversity scorecard to measure performance in succession planning.
- Hired a Network Human Resources Manager to integrate services Network-wide.
- Initiated Career Counseling Centers at each site.
- Improved participation in exit/entrance interviews of new employees.
- Increased E-Learning through the hiring of an E-Learning Coordinator, purchase of new Blackboard learning technology, development of new courses and promotion of E-Learning through fairs at each facility.



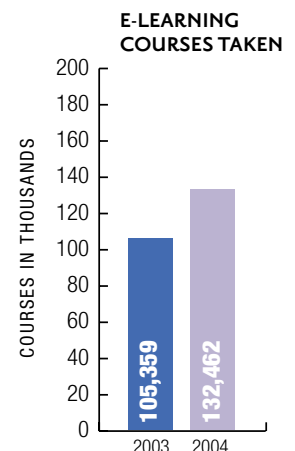
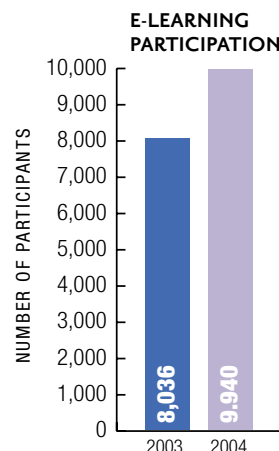
- Developed a Nurse Recruitment and Retention Video.
- Increased e-learning users to 9,940 Network-wide.
- Provided leadership training for high potential mid-level managers.
- Coordinated the Network Leadership Development Institute.
- Implemented technical field internships.
- Provided GED assistance to employees.
- Purchased on-line continuing education for nurses through NurseWeek.
- Required personal development plans for all managers.
- Used performance-based interviewing for most selections.
- Expanded use of Alternative Dispute Resolution.
- Maintained positive Labor/Management relations.

OUR GOALS FOR 2005

- Deployment of workforce development initiatives to all levels of the organization.
- Implement the Network Human Resources Service Line Plan.
- Implement a systematic approach to succession planning.
- Continue goal sharing, focusing on performance initiatives.
- Increase internal and external recruitment and retention programs.
- Collect employee satisfaction data from surveys and entrance/exit interviews.
- Implement strategies for nurse recruitment and retention.
- Improve employee satisfaction scores.
- Implement action plans from the All Employee Survey.
- Increase awareness of diversity issues.
- Implement Emerging Leaders facility leadership development programs.

On-Line or E-Learning Increases Dramatically –

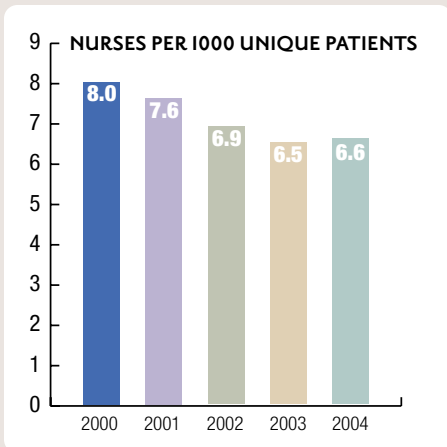
E-Learning offers the ability to provide training to large numbers of employees without leaving the worksite. We hope to continue to see increases in these numbers.



BUILDING HEALTHY COMMUNITIES

EXPAND COMMUNITY, ACADEMIC AND RESEARCH PARTNERSHIPS AND PROVIDE LEADERSHIP IN TIMES OF LOCAL AND NATIONAL DISASTER

- Responded to calls for assistance following Hurricane Charlie and Francis with over a hundred volunteers with 15 being deployed to assist.
- Conducted biannual Network town hall meetings at each facility.
- Provided annual Congressional Briefings.
- Appointed key stakeholders to Network councils and committees.
- Managed the largest VA research program supporting over 2,000 projects, 615 researchers and a budget of \$121.2 million.
- Achieved National Committee for Quality Assurance (NCQA) accreditation at all Network Research Programs.
- Supported the California State Veterans Homes in Barstow and Chula Vista by providing inspections, consultative services, laundry and laboratory services.



Nursing Numbers Stable After Decline – The nursing shortage has made it difficult to maintain levels of nurse staffing locally and at the national level. In order to attract new nurses and to keep up with the private sector, nursing pay has been adjusted and an extensive retention and recruitment actions have been developed.

- Served as VAs single largest educator of healthcare professionals, training 726 medical residents and thousands of nursing and allied health students.
- Instituted resident review requirements.
- Collaborated with community groups to expand services to homeless veterans.
- Maintained excellent Veteran Service Officer relations at all sites.
- Championed numerous civic causes throughout Southern California and Southern Nevada.



OUR GOALS FOR 2005

- Ensure resident supervision requirements are met.
- Improve resident physician satisfaction.
- Enhance partnerships with DoD, Indian Health Service and the State.
- Implement targeted outreach to returning combat veterans, minority and other underserved groups.
- Provide value to the community through education and civic involvement.
- Conduct Network-wide drills for emergency preparedness annually.
- Improve emergency preparedness collaboration with the community.
- Involve the community in implementing the VA National CARES Plan

MEDICAL CENTERS

**VA Southern Nevada
Healthcare System**
P.O. Box 360001
Las Vegas, NV 89036
702-636-3000

Mike O'Callaghan Federal Hospital
4700 Las Vegas Boulevard North
Las Vegas, NV 89191
702-653-2215

VA Loma Linda Healthcare System
11201 Benton Street
Loma Linda, CA 92357
909-825-7084

VA Long Beach Healthcare System
5901 E. 7th Street
Long Beach, CA 90822
562-826-8000

VA San Diego Healthcare System
3350 La Jolla Village Drive
San Diego, CA 92161
858-552-8585

**VA Greater Los Angeles
Healthcare System**
11301 Wilshire Boulevard
Los Angeles, CA 90073
310-478-3711

COMMUNITY CLINICS

Anaheim
1801 W. Romneya Drive, Suite 303
Anaheim, CA 92801
714-780-5400

Antelope Valley
547 W. Lancaster Blvd.
Lancaster, CA 93536
661-729-8655

Bakersfield
1801 Westwind Drive
Bakersfield, CA 93301
661-632-1800

Cabrillo
2001 River Avenue
Long Beach, CA 90806
562-388-8000

Chula Vista
835 3rd Avenue
Chula Vista, CA 91910
619-409-1600

Corona
800 Magnolia Ave #101
Corona, CA 92879
951-817-8820

East Los Angeles
5400 E. Olympic Boulevard #150
City of Commerce, CA 90040
323-725-7557

Escondido
815 East Pennsylvania Avenue
Escondido, CA 92025
760-466-7020

Gardena
1251 Redondo Beach Blvd., 3rd Floor
Gardena, CA 90247
310-851-4705

Henderson
2920 Green Valley Parkway
Suite 215
Henderson, NV 89014
702-456-3825

Imperial Valley
528 G. Street
Brawley, CA 92227
760-344-1881

Las Vegas
MASH Village
1581 N. Main Street
Las Vegas, NV 89101
702-386-3140

Lompoc
Contact Santa Barbara
805-683-1491

Los Angeles
351 E. Temple Street
Los Angeles, CA 90012
213-253-5000

Mission Valley
8810 Rio San Diego Drive
San Diego, CA 92108
619-400-5000

Oxnard
250 W. Citrus Grove Avenue
Suite 150
Oxnard, CA 93030
805-983-6384

Palm Desert
41-865 Boardwalk, Suite 103
Palm Desert, CA 92211
760-341-5570

Pahrump
2100 E. Calvada Boulevard
Pahrump, NV 89048
775-751-2053

Pasadena
1350 N. Altadena Dr.
Pasadena, CA 91007
626-296-9514

San Luis Obispo
1288 Morro St., Suite 200
San Luis Obispo, CA 93401
805-543-1233

Santa Ana
2740 S. Bristol Street, Suite 100
Santa Ana, CA 92704
714-825-3500

Santa Barbara
4440 Calle Real
Santa Barbara, CA 93110
805-683-1491

Sepulveda
16111 Plummer Street
Sepulveda, CA 91343
818-891-7711

South Los Angeles
3737 E. Martin Luther King Jr.
Blvd., Suite 515
Lynwood, CA 90262
1-800-455-0264

Sun City
28125 Bradley Road
Suite 130
Sun City, CA 92586
909-672-1931

Upland
1238 E. Arrow Highway, No. 100
Upland, CA 91786
909-946-5348

Victorville
12138 Industrial Boulevard
Suite 120
Victorville, CA 92392
760-951-2599

Vista
1840 West Drive
Vista, CA 92083
760-643-2000

Whittier/Santa Fe Springs
10210 Orr and Day Road
Santa Fe Springs, CA 90670
562-864-5565

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HEALTHCARE NETWORK**

